

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>mm</i>		3/21/00
O.I.P.E. CLASSIFIER		16	25.00
FORMALITY REVIEW	<i>LH</i>	60165	5-24-00
RESPONSE FORMALITY REVIEW	<i>LH</i>	60105	7-7-00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓		
2	✓		
3	✓		
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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